



STATE OF MARYLAND

DHMH

Maryland Department of Health and Mental Hygiene

Larry Hogan, Governor - Boyd Rutherford, Lt. Governor - Van Mitchell,
Secretary

To: DDA Licensed Service Providers
DDA Coordination of Community Services Providers
Fiscal Management Service Providers
Support Brokers
DDA Families and Self- Advocates

From: Bernard Simons, Deputy Secretary
Developmental Disabilities Administration

CC: DDA Headquarters and Regional Offices

Date: July 8, 2015

Re: Developmental Disabilities Transformation and Communication

Since beginning as the Director of DDA in April of 2014, people have asked me what direction I planned to take DDA. Before I could answer that question, I needed to hear from the stakeholders in Maryland. Through the last year, there have been a number of forums for self-advocate, families and providers to weigh in how things were going and what direction they thought DDA should go. Specific forums on the DDA Waiver, Targeted Case Management, Person-Centered Plan, Self-Direction and town hall meetings were conducted around the state; the input we received in these forums has been very informative and posted on the DDA Website. The culmination of the stakeholder input has guided DDA in the creation of a vision and call to action that I would like to share with you.

The Vision: People with developmental disabilities will have full lives in the communities of their choice where they are included, participate, and are active citizens.

Call to Action: Create a flexible, person centered, family oriented system of supports so people can have full lives.

I cannot put it any better than American Association on Intellectual and Developmental Disabilities (AAIDD) President, Amy Hewitt, when she wrote: "Everything about services and supports to people with IDD is about community living. Community living has become a complex and evolving construct in this field. What once simply meant "not living in an institution" or "living in the community" now has different meaning and new contexts. We know more; we have learned and evolved our thinking. Community living is now viewed as people: 1) living where and with whom they choose; 2) working in real jobs of their choice and earning real wages; 3) practicing faiths of their choice; 4) being connected to an array of friends and family with whom they have deep personal and intimate relationships;

5) growing and developing personally through opportunities for education and lifelong learning; 5) exploring areas of personal interest; 6) experiencing physical and emotional wellbeing; 7) having membership in community organizations; 8) making choices, taking risks, and determining the course of their own lives; and 9) accepting the responsibilities of citizenship (such as paying taxes and voting).”*

We will listen to what people want their lives to look like and we will create the supports and services they need to achieve their own personal vision. We will transform practices, policies and funding processes to create flexibility. We will realign our waiver and provide technical support and training to self-advocates, their families and the providers of services. We will focus on one person at a time.

I have identified five essential focus areas for community living to integrate in the transformation of DDA: Self-Advocacy, Self Determination, Supporting Families, Employment First, and Independent Supported Living. You will be learning more about how each of these focus areas fit into our message of flexibility, person-centered, family oriented system of supports one person at a time.

The transformation of the system will take time and partnership with all stakeholders. I ask for your support, commitment and leadership in communicating our message and call to action.

Thank you!

*Dr. Hewitt’s words can be found in: INTELLECTUAL AND DEVELOPMENTAL DISABILITIES 2014, Vol. 52, No. 6, 475–495.